Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Panerwood Reduction Act of 199 o persons are required to respond to a collection of information unless it displays a valid OMB control number Fees pursuant to the Consolid (4818). **FEE TRANSMITTAL**

For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Complete if Known						
Application Number	10/829,574					
Filing Date	04/22/2004					
First Named Inventor	SUNDARAM, Mani et al.					
Examiner Name	JACKSON, Jerome					
Art Unit	2878 2815					
Attorney Docket No.	20030126-CIP					

PTO/SB/17 (12-04)

TOTAL AMOUNT OF PAY	/MENT (S	\$) 180.00		Attorney Docke	et No. 20	0030126-CIP				
METHOD OF PAYMENT (check all that apply)										
Check Credit Deposit Account For the above-ident	Deposit Accou	Money Order [unt Number:19013 it account, the Direc	80	Deposit A	(please identify Account Name: o: (check all t	BAE System	s Informa	tion 🖪		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION										
1. BASIC FILING, SEA	FILING	EXAMINATION FEES Small Entity		CH FEES Small Entity		ATION FEES Small Entity				
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$)	Fees Pa	<u> </u>		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Total Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Small Entity Fee (\$) Fee (\$) Fee (\$) Fee (\$) Multiple Dependent Claims										
20 or HP =		<u>ms Fee (\$)</u> x	=	raiu (4)	Fee (\$)		_			
HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep	Extra Clain	<u>ms Fee (\$)</u> x	_ =	Paid (\$)						
	d drawings I 50 sheets Extra She	or fraction thereo	of. See 3 er of each	35 U.S.C. 41(a) h additional 50 d)(1)(G) and or fraction the	37 CFR 1.16(s) nereof Fee (\$).	Paid (\$)		
4. OTHER FEE(S)					<u>Fee</u>	s Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount) Other: Information Disclosure Statement after Office Action					\$18	\$180.00				

SUBMITTED BY Registration No. 42,269 Telephone 603-886-6100 Signature (Attorney/Agent) Date Name (Print/Type)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.